

DIRECT Care for the Homeless Act (of 2023*)

Section by Section Analysis

Section 1. Short Title

This bill will be referred to as the “DIRECT Care for the Homeless Act of 2023” or the “Delivering Integral, Rehabilitating, Empathetic, Comprehensive and Targeted Care for the Homeless Act.”

Section 2. Definitions

Provided are definitions for homeless, homeless individual, street medicine, unsheltered, and what is an eligible city or county within this Program.

Section 3. GAO Report

In 2027, there will be a GAO report released on the efficacy of the Program. This section also requires HHS to (1) publish rules for data collection necessary to the report and (2) create an online platform for participating healthcare workers to provide feedback on the Program.

Section 4. Sunset

The provisions of the DIRECT Care for the Homeless Act of 2023 will sunset in 2028.

TITLE I – STREET MEDICINE

Section 101. Street Medicine Pilot Program

The Secretary of Health and Human Services (HHS) shall conduct a pilot program to provide payments to providers in eligible cities and counties for furnishing medical services to covered individuals. Street medicine providers seeking to be part of the Program will be able to after applying for participation.

To prescribe opioids, providers must meet the standards of their respective State. During each visit with a patient, there must be a prescriber present either in person, via telemedicine or phone call. Providers will not be reimbursed for the supervised consumption of schedule I drugs, fentanyl, heroin, cocaine, or methamphetamine.

No later than 120 days after enactment, the Secretary of HHS must publish rules to establish and maintain a clear process for reimbursements. And, the Secretary must create and maintain an online platform – operating 24/7 – through which participating providers can give feedback on the reimbursement process.

Unsheltered homeless individuals who are enrolled in a primary care case management system or Medicaid managed care organization (MCO) shall not be denied freedom of choice of qualified street medicine providers. Prior authorization shall not be required for purposes of an individual receiving care from a street medicine provider. Participating street medicine providers will have the ability to refer patients to medically covered services within the proper Making Care Primary (MCP) network. These providers will also appropriate referral and authorization mechanisms in place to facilitate access to needed services without requiring authorization by an assigned primary care.

The Secretary of HHS will have the authority to allocate any existing funds she or he deems necessary for the Program.

The section also provides definitions for the following: Covered individual; eligible city or county; prescriber; eligible provider; homeless; homeless individual; medical services; qualified electronic health record; street medicine; and, supervised consumption.

TITLE II – FEDERAL LOAN REPAYMENT PROGRAMS

Section 201. Public Health Loan Repayment Programs

In carrying out programs under the Public Health Service Act for loan repayments, the Secretary of HHS must include awards to applicants seeking to practice street medicine in eligible cities and counties. In assigning members of the National Health Service Corps, the Secretary must assign an appropriate number of Corps members to practice street medicine in eligible cities and counties. And, the Secretary must treat mobile clinics providing street medicine – as defined in the Act – as a health professional shortage area eligible for designation under section 332 of the Public Health Service Act.

Section 202. Community Service Officers

Individuals who serve as a community service officer for one year, either full-time or part-time, will be eligible for the Public Student Loan Forgiveness (PSLF) Program. Community service officers are defined as professional or paraprofessional law enforcement who do not respond to emergencies, do not carry firearms, and do not have power of arrest.”

This section also creates an appeals process for any borrower who is denied PSLF forgiveness.

TITLE III – LOAN AND INTEREST PAUSE FOR RESIDENTS AND MEDICAL STUDENTS

Section 301. Student Loan and Interest Pause

Medical students and residents who are serving in a program which, in part, focuses on street medicine, will be eligible for a pause on student loan payments and a pause on accrued interest. Community service officers are defined as “professionals or paraprofessional law enforcement who do not respond to emergencies, do not carry firearms, and do not have power of arrest.”

This section also creates an appeals process for borrowers initially denied PSLF forgiveness.

TITLE IV – IMPROVED STANDARDS FOR SHELTERS

Section. 401. Safe Shelters

This provision contains whereas clauses regarding safety in homeless shelters.

Section 402. Improved Standards

Homeless shelters which received funding through the McKinney-Vento Homeless Assistance Act will be required to (1) provide menstrual products for each menstruating resident and (2) maintain a non-invasive security camera system.